

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/722,993
Filing Date	26 Nov 2003
First Named Inventor	Hong, Jay Wu
Group Art Unit	2609
Examiner Name	Kenan Cehic
Attorney Docket Number	CISCO-7235

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Being paid (EFS/Credit card) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> <input type="checkbox"/> After Final <input type="checkbox"/> <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 2px;">Return Postcard</div> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>
<div style="border: 1px solid black; padding: 5px;"> Remarks </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT/ CORRESPONDENCE ADDRESS

Firm or Individual name	Dov Rosenfeld, Reg. No. 38687
Signature	/Dov Rosenfeld/ #38687
Date	October 12, 2007

ADDRESS FOR CORRESPONDENCE

Firm or Individual name	Dov Rosenfeld 5507 College Avenue, Suite 2, Oakland, CA 94618, Tel: 510-547-3378
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Hong Application No.: 10/722,993 Filed: November 26, 2003 Title: METHOD AND APPARATUS FOR AUTOMATICALLY CONFIGURING DEVICES ON A WIRELESS NETWORK	Group Art Unit: 2609 Examiner: Kenan Cehic
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TRANSMITTAL: RESPONSE TO OFFICE ACTION

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Commissioner:

Transmitted herewith is a response to an office action for the above referenced application.

If there is any required additional claim fee, it has been calculated as follows:

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	NO. OF EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	53	MINUS	56	0	\$50	\$ 0.00
INDEP. CLAIMS	7	MINUS	7	0	\$200	\$ 0.00
TOTAL ADDITIONAL FEE DUE:						\$ 0.00

 Payment by EFS-Web is being made concurrently for presentation of additional claims.

 X Applicant(s) believe(s) that no Extension of Time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for an extension of time.

 X Applicant(s) hereby petition(s) for an Extension of Time under 37 CFR 1.136(a) of:

<u> X </u> one months (\$120)	<u> </u> two months (\$410)
<u> </u> three months (\$930)	<u> </u> four months (\$1450)

Our Ref. No.: CISCO-7235

If an additional extension of time is required, please consider this as a petition therefor.

X Payment by EFS-Web is being made concurrently for the required fee(s) is attached.

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account

No. 50-0292 (A DUPLICATE OF THIS TRANSMITTAL IS ATTACHED):

X Any missing filing fees required under 37 CFR 1.16 for presentation of additional claims.

X Any missing extension or petition fees required under 37 CFR 1.17.

Respectfully Submitted,

October 12, 2007

Date

/Dov Rosenfeld/ #38687

Dov Rosenfeld, Reg. No. 38687

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